



PTO/SB/31 (12/97)

Approved for use through 09/30/00. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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10
Notice of
Appeal
12-3-99
H. Little

**NOTICE OF APPEAL FROM THE EXAMINER TO THE
BOARD OF PATENT APPEALS AND INTERFERENCES**

Docket Number (Optional)

042390.P5326

In re Application of
Scott L. Baker

Application Number
09/061,017

Filed
09/061,017

For
METHOD AND APPARATUS FOR INTERLEAVING A

Group Art Unit
2732

Examiner
D. Vincent

TECH CENTER 2700

DEC - 2 1999
\$300.00

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DEC - 1 1999
CPE/JCWS
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Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner dated, November 2, 1999, rejecting the following claims: 1-19.

The fee for this Notice of Appeal is (37 CFR 1.17(b))

Applicant is a small entity under 37 CFR 1.9 and 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$300.00

A statement of small entity status under 37 CFR 1.27:

- is enclosed.
 has already been filed in this application.

- A check in the amount of the fee is enclosed.
 The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.
 The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to a Deposit Account No. 02-2666. I have enclosed a duplicate copy of this sheet.

A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

12/02/1999 DVUONG 00000101 09061017

01 FC:119

I am the 300.00 OP

- applicant.
 assignee of record of the entire interest.
 attorney or agent of record.
 attorney or agent acting under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a) _____.

Signature

Gregory D. Caldwell, Reg. No. 39,926

Typed or printed name

11/19/99
Date

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box

NOV 24 1999

PTO/SB/17 (2/98)

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FEE TRANSMITTAL

Patent fees are subject to annual revision on October 1. These are the fees effective October 1, 1997. Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$ 300.00)

FEE & TRADE		Complete if Known	
Application Number	09/061,017		
Filing Date	April 15, 1998		
First Named Inventor	Scott L. Baker		
Examiner Name	D. Vincent		
Group/Art Unit	2732		
Attorney Docket Number	042390.P5326		

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number **02-2666**
Deposit Account Name **Blakely, Sokoloff, Taylor & Zafman LLP**

Charge Any Additional Fee Required Under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. Charge the Issue Fee Set in 37 CFR § 1.18 at the Mailing of the Notice of Allowance, 37 CFR 1.311(b)

2. Payment Enclosed:

Check Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

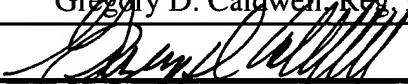
Large Entity	Small Entity	Fee	Fee	Fee	Fee	Fee Description	Fee Paid
Code	Code	(\$)	Code	(\$)	Code	(\$)	
101	760	201	380	Utility filing fee			
106	310	206	155	Design filing fee			
107	480	207	240	Plant filing fee			
108	760	208	380	Reissue filing fee			
114	150	214	75	Provisional filing fee			
SUBTOTAL (1)							

2. EXTRA CLAIM FEES	Extra Claims	Fee from below	Fee Paid
Total Claims	<input type="text"/>	<input type="text"/>	<input type="text"/>
Independent Claims	<input type="text"/>	<input type="text"/>	<input type="text"/>
Multiple Dependent	<input type="text"/>	<input type="text"/>	<input type="text"/>

Large Entity	Small Entity	Fee	Fee	Fee	Fee Description
Code	Code	(\$)	Code	(\$)	
103	18	203	9	Claims in excess of 20	
102	78	202	39	Independent claims in excess of 3	
104	260	204	130	Multiple Dependent claim, if not paid	
109	78	209	39	**Reissue independent claims over original patent	
110	18	210	9	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 300.00)

SUBMITTED BY				Complete (if applicable)	
Typed or Printed Name	Gregory D. Caldwell, Reg. No. 39,926			Reg. Number	
Signature			Date	11/19/99	Deposit Account User ID
					02-2666

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NOV 24 1999

PTO/SB/21 (12/97)

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TRANSMITTAL FORM*(to be used for all correspondence after initial filing)*

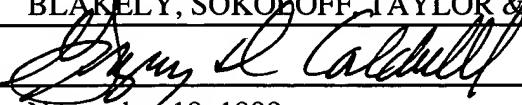
TRANSMITTAL FORM		FILING INFORMATION	
		Application Number	09/061,017
		Filing Date	April 15, 1998
		First Named Inventor	Scott L. Baker
		Group Art Unit	2732
		Examiner Name	D. Vincent
Total Number of Pages in This Submission	5	Attorney Docket Number	042390.P5326

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i>	<input type="checkbox"/> After Allowance Communication to Group	
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences	
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input checked="" type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i>	
<input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information	
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Status Letter	
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Additional Enclosure(s) <i>(please identify below):</i>	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer	<div style="border: 1px solid black; padding: 5px; width: 150px; height: 100px; margin: 0 auto;"> <div style="text-align: center; margin-bottom: 5px;">TECH CENTER 2700</div> <div style="text-align: center;">DEC - 2 1999</div> </div>	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Small Entity Statement		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Request for Refund		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks		

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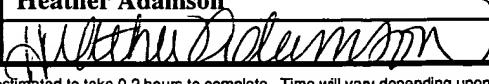
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Gregory D. Caldwell, Reg. No. 39,926 BLAKELY, SOKOLOFF TAYLOR & ZAFMAN LLP
Signature	
Date	November 19, 1999

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class mail with sufficient postage in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on:

November 19, 1999

Typed or printed name	Heather Adamson		
Signature		Date	11/19/99

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